MULTIPLE DE... ENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.		FILING DATE
APPLICANT(S)	**10/531554**	

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3		1					53						
4	1						54						
5		1					55						
6		1					56						
7		1					57						
8	1						58						
9	1						59						
10		1					60						
11	1						61						
12	1						62						
13	1						63						
14		2					64						
15		1					65						
16		1					66						
17		1					67						
18	1						68						
19		1					69						
20		1					70						
21							71						
22							72						
23							73						
24							74						
25							75						
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29							79						
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37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	8	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	13	←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	21						TOTAL CLAIMS						

PTO - 1360 (REV. 11/84)